Lamont Hunter
PCT International Division
(703) 305-9338

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 707088073 FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND	DEP.
1	1				1		51						
2	1				1		52						
3		2		1		1	53						
4		2	1			1	54						
5		2		1		1	55						
6		2					56						
7		2		1			57						
8		1				1	58						
9		1		1			59						
10		1		1			60						
11	1				X		61						
12				1		1	62						
13				1		1	63						
14				1		1	64						
15						1	65						
16				1		1	66						
17				1		1	67						
18				1		1	68						
19				1		1	69						
20						1	70						
21						1	71						
22						1	72						
23						1	73						
24					1		74						
25					1		75						
26							76						
27							77						
28							78						
29							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.			3		4		TOTAL IND.						
TOTAL DEP.			16		20		TOTAL DEP.						
TOTAL CLAIMS			19		24		TOTAL CLAIMS						

TO-1360 (3-78)